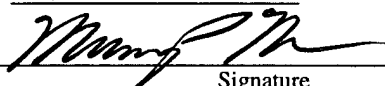
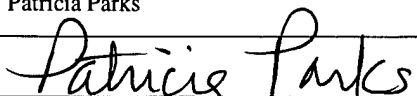


<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number: SC11850HP
In re Application of	Man Hon Cheng	
Application Number	10/092,683	Filed March 6, 2002
For	MULTI-ROW LEADFRAME	
Group Art Unit	2827	Examiner James M. Mitchell
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.		
The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):		
<input checked="" type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 110.00
<input type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 420.00
<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 950.00
<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1480.00
<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2010.00
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____	
<input type="checkbox"/>	A check in the amount of the fee is enclosed.	
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.	
<input checked="" type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.	
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number <b>502117, Motorola, Inc.</b>	
<input checked="" type="checkbox"/>	I have enclosed a duplicate copy of this sheet.	
I am the:		
<input type="checkbox"/>	Applicant/inventor	
<input type="checkbox"/>	Assignee of record of the entire interest. See 37 CFR 3.71.	
<input checked="" type="checkbox"/>	Attorney or agent of record (Registration No.:	42,038 )
<input type="checkbox"/>	Attorney or agent under 37 CFR 1.34(a)	
	Registration number if acting under 37 CFR 1.34(a)	42,038
<u>DECEMBER 3, 2003</u>		<u></u>
Date		Signature
<u>Michael P. Noonan</u>		
Type or printed name		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/>	Total of <u>1</u> form(s) are submitted	
<b>CERTIFICATE OF MAILING</b>		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date: <u>12/3/03</u>		
Typed or printed name	Patricia Parks	
Signature	<u></u>	

12/05/2003 HDEMESS1 00000080 502117 10092683

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